



Coalition for a Healthy Flathead

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Let's Celebrate!

**Smokefree
MONTANA**

January is Cervical Cancer Screening Month

Attention all women! For one of your new year's resolutions schedule a pap smear. A pap smear can find abnormal cells that may indicate cervical cancer.

Cervical cancer affects over 1000 women in Montana and approximately 10,000 women in the United States each year. Cervical cancer is the second most common type of cancer for women worldwide, but because it develops over time, it is also one of the most preventable types of cancer.

Deaths from cervical cancer in the United States continue to decline by approximately 2 percent a year. This decline is primarily due to the widespread use of

the Pap test to detect cervical abnormalities and allow for early treatment. Most women who have abnormal cervical cell changes that progress to cervical cancer have never had a Pap test or have not had one in the previous three to five years.

Cancer of the cervix tends to occur during midlife. Half of the women diagnosed with the disease are between 35 and 55 years of age. It rarely affects women under age 20, and approximately 20 percent of diagnoses are made in women older than 65. For this reason, it is important for women to continue cervical cancer screening until at least the age of 70.

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States Cut Funding for Tobacco Prevention Programs

The following is taken from a December 9, 2009 news release from the Campaign for Tobacco Free Kids:

The states are collecting record amounts of revenue from the 1998 tobacco settlement and tobacco taxes, but have cut funding for programs to reduce tobacco use by more than 15 percent in the past year, according to a report released by a coalition of public health organizations.

With the nation's adult smoking rate stalled after decades of decline, the report warns that continued progress is at risk unless states significantly increase funding for programs to prevent kids from smoking and help smokers quit. The report also calls on Congress to ensure that health care reform legislation includes adequate funding for disease prevention initiatives, including tobacco pre-

vention and cessation, and mandates coverage in Medicaid and other health insurance programs for smoking cessation medication and counseling.

The report, titled "A Broken Promise to Our Children: The 1998 State Tobacco Settlement 11 Years Later," was released by the Campaign for Tobacco-Free Kids, American Heart Association, American Cancer Society Cancer Action Network, American Lung Association and Robert Wood Johnson Foundation. These organizations have issued annual reports assessing whether the states have kept their promise to use funds from the state tobacco settlements - estimated to total \$246 billion over the first 25 years - to fight tobacco use. The states also col

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Cervical Cancer

SIGNS AND SYMPTOMS OF CERVICAL CANCER

Precancerous cervical cell changes and early cancers of the cervix generally do not cause symptoms. Abnormal or irregular vaginal bleeding, pain during sex, or vaginal discharge may be symptoms of more advanced disease. Notify your healthcare provider if you experience any of the previous symptoms or pelvic pain not related to your menstrual cycle, heavy or unusual discharge that may be watery, thick, and possibly have a foul odor, increased urinary frequency or pain during urination.

DETECTING CERVICAL CANCER

The best way to determine if precancerous or cancerous

cells are present is with a Pap test. The Pap test can determine if cell changes have taken place that may indicate precancerous or cancerous development. In addition to a Pap test, your doctor may recommend an HPV test. The HPV test does not indicate the presence of precancerous or cancerous cells. It determines whether or not a woman has an HPV infection with any of the 13 high-risk HPV types. This information will assist you and your doctor to determine appropriate follow-up and intervals for cervical cancer screening.

Regular screening helps to save lives.

Source: American Cancer Society, Montana Comprehensive Cancer Program, National Cervical Cancer Coalition

Lung Cancer Breakthrough

American Lung Association research has yielded an important discovery in the treatment of lung cancer, a disease that causes more deaths than any other cancer in the United States. Alan P. Fields, Ph.D., a recent recipient of the American Lung Association/LUNGevity Foundation Lung Cancer Discovery Award, and his team at the Mayo Clinic Florida have found a major oncogene - a gene responsible for lung cancer development in mice.

Along with this breakthrough, the team also found a drug once used to treat rheumatoid arthritis, showed promise in inhibiting the oncogene, known as protein kinase C α (PKC α), in some types of lung cancer. The drug aurothiomalate (ATM) is a targeted therapy, meaning it doesn't kill both cancer and normal cells the way many chemotherapy drugs do. ATM instead targets PKC α , preventing the oncogene's ability to turn normal cells into cancerous tumor cells.

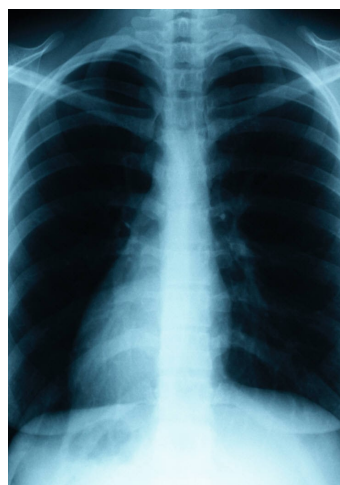
Dr. Fields and his team found that PKC α is over-expressed in a majority of lung cancer and is necessary for

lung cancer growth. ATM was effective in producing an anti-tumor response in mice with lung cancer when given at levels similar to those given to people being treated for rheumatoid arthritis. These results suggest that lung cancer patients whose tumors have high PKC α levels are likely to respond to ATM therapy. Dr. Fields also found that ATM is effective when used together with other targeted drugs used to treat lung cancer, but not with traditional chemotherapy drugs.

Building on the data gathered through his American Lung Association/LUNGevity Foundation Lung Cancer Discovery Award, Dr. Fields and his colleagues have conducted a Phase I clinical trial of ATM in lung cancer patients, to assess the safety and optimal dosing of the drug for lung cancer treatment. His results show that ATM is well-tolerated and

he is planning to soon start a Phase II trial to look at the effectiveness of the drug in combination with another targeted agent as a treatment for lung cancer.

The American Lung Association and the LUNGevity Foundation came together in 2005 to create the Lung Cancer Discovery Award and jointly fund research to support their mutual interest in finding a cure for lung cancer. Since its inception, the Lung Cancer Discovery Award has funded 12 research proposals totaling \$1.2 million.



"With five-year survival rates for lung cancer at only 15 percent, the need

for new treatments is critical," said Charles D. Connor American Lung Association President and CEO. "We are committed to finding a cure for lung cancer."

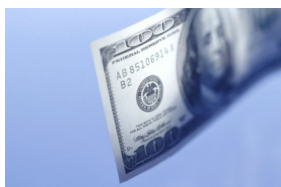
Source: American Lung Association

Report

lect billions more each year from tobacco taxes.

Key findings of this year's report include:

- * The states this year (Fiscal Year 2010) will collect \$25.1 billion in revenue from the tobacco settlement and tobacco taxes, but are spending just 2.3 percent of it - \$567.5 million - on tobacco prevention and cessation programs (the states also receive \$62 million in federal grants for tobacco prevention, for total funding of \$629.5 million). With more states expected to increase tobacco taxes in the coming year, that revenue figure is certain to increase.
- * In the past year, states have cut funding for tobacco prevention by \$103.4 million, or 15.4 percent. Including cuts approved just last week, New York made the largest cut - \$25.2 million, or 31 percent - despite having a successful program that has reduced smoking to well below national rates. Other states with large cuts include Colorado, Maryland, Pennsylvania and Washington.
- * Only one state - North Dakota - currently funds a tobacco prevention program at the level recommended by the U.S. Centers for Disease Control and Prevention (CDC). Only nine other states fund tobacco prevention at even half the CDC-recommended level, while 31 states and DC provide less than a quarter of the recommended funding.
- * Tobacco companies spend \$20 to market to-



bacco products for every one dollar the states spend to fight tobacco use. According to the latest data from the Federal Trade Commission, tobacco companies spend \$12.8 billion a year on marketing.

The report comes as recent surveys have found that smoking declines in the United States have slowed and even stalled. The CDC in November reported that the adult smoking rate in 2008 was 20.6 percent - essentially unchanged since 2004 when 20.9 percent smoked. While smoking among high school students has declined by 45 percent from a high of 36.4 percent in 1997, 20 percent of high schoolers still smoke and declines have slowed in recent years.

"To continue reducing tobacco use, elected officials at all levels must resist complacency and redouble efforts to implement proven strategies," said Matthew L. Myers, President of the Campaign for Tobacco-Free Kids. "Despite their current budget challenges, the states lack excuses for failing to do more. They are collecting record amounts of tobacco money, more of which should be used to fight the tobacco problem. And there is overwhelming evidence that tobacco prevention programs not only reduce smoking and save lives, they also save money by reducing tobacco-related health care costs. Those states that make shortsighted decisions to cut tobacco prevention will pay a steep price in lives and dollars."

"Fully funded tobacco prevention and cessation programs

stop addiction before it starts and improve the health of our nation's communities," said John R. Seffrin, PhD, chief executive officer of the American Cancer Society Cancer Action Network (ACS CAN), the advocacy affiliate of the American Cancer Society. "States must do better at funding programs that help reduce tobacco use and protect the health of children, 3,500 of whom try their first cigarette every day."

"Fully funded tobacco prevention and cessation programs stop addiction before it starts and improve the health of our nation's communities"

The report cites conclusive evidence that tobacco prevention and cessation programs work to reduce smoking, save lives and save money. Maine, which has long had one of the best-funded programs, has reduced smoking by 71 percent among middle school students and by 64 percent

among high school students since 1997. Washington state, before cutting its program by 42 percent this year, reduced adult smoking by 30 percent and youth smoking by 50. An August 2008 study found that California's tobacco control program, the nation's longest-running, saved \$86 billion in health care costs in its first 15 years, compared to \$1.8 billion spent on the program, for a return on investment of nearly 50:1.

Tobacco use is the leading preventable cause of death in the U.S., killing more than 400,000 people and costing \$96 billion in health care bills each year. Every day, another 1,000 kids become regular smokers - one-third of them will die prematurely as a result.

Full report:

www.tobaccofreekids.org/reports/settlements/

Source: Campaign for Tobacco Free Kids

A Growing Success in the Battle Against Colorectal Cancer

Colon cancer deaths could drop dramatically in the next decade because of better screening and treatment, according to an optimistic new prediction by top researchers. The estimate was made in an annual report that shows that, overall, the U.S. cancer death rate is continuing to decline, as it has since the 1990s. The new report was put together by the Cancer Society, the National Cancer Institute, the Centers for Disease Control and Prevention and the North American Association of Central Cancer Registries.

The report released in December focuses largely on cancers of the colon and rectum, which together are the third leading cancer killer in the United States. An estimated 50,000 people will die from it this year in the United States.

Cancer diagnoses and death rates have declined significantly, a success attributed largely to improvements in screening and treatment, and declines in smoking.

The battle against colorectal cancer has been a growing success story:

The death rate dropped roughly 20 percent in the last 10 years, according to American Cancer Society figures.

The new report by researchers at the advocacy group and other organizations predicts that death rate will drop even more over the next decade. By 2020, the rate could be half what it was in 2000, they said. Cancer trends from 1975 through 2006 were also reviewed. The Cancer Society and others reported 2006 cancer death statistics in May, but this report provides further analysis and adds the predictions about colorectal cancer.

But overall, cancer diagnoses and death rates have declined signifi-

cantly, a success attributed largely to improvements in screening and treatment and declines in smoking.

The colorectal cancer death rate was about 17 deaths per 100,000 people in 2006. Better chemotherapy drugs have been used along with surgery to improve survival. And as of 2005, about half of U.S. adults aged 50 or older had had a recommended screening, such as a colonoscopy within the last 10 years or a stool blood test within the last year.

Everyone 50 - 75 at average risk should be screened for colorectal cancer according to their healthcare providers recommendations. Those with a family history or personal medical history should begin screening earlier and may need to be screened more often.

See the full report at:
www.interscience.wiley.com/cancer/report2009

Source: Cancer Online

MONTANA TOBACCO



- * Free Counseling
- * Free Information
- * Free Nicotine Replacement
- * Reduced cost prescription CHANTIX

Upcoming Events

January:	Cervical Cancer Awareness Month
January 1:	Colorectal Cancer Screening Kick-off
January 21:	Coalition Meeting
February 14-20:	Through With Chew Week
February 18:	Great American Spit Out



It's your life.
And no one can protect it better than you.

JUDI, BREAST CANCER SURVIVOR

If you're over 40, check your breasts regularly, and have a mammogram and a clinical exam every 1–2 years. For more information, visit www.cdc.gov/RightToKnow or call 1–800–CDC–INFO (232–4636); 1–888–232–6348 (TTY).

**BREAST CANCER SCREENING
THE RIGHT TO KNOW**



Montana CCC Plan Goals

The Montana Comprehensive Cancer Control Plan focuses on working together to reduce cancer incidence, morbidity, and mortality for all Montanans.

Prevention: Reduce the risk factors that lead to cancer, e.g., tobacco, poor nutrition, inactivity, ultraviolet light exposure, and environmental carcinogens.

Early Detection: Broaden coverage, increase utilization, and promote compliance with cancer-screening guidelines.

Treatment: Ensure prevailing standards of care, accessibility, availability, and utilization of cancer treatment services for all. Promote optimum patient/provider communication.

Quality of Life and Survivorship: Promote quality of life for cancer

patients, empower patients and families, ensure age-appropriate services for complementary medicine.

Research: Provide access to cancer research information and ensure high-quality cancer research.

Data, Registry and Surveillance: Collect, analyze, and disseminate quality cancer-related data.

Advocacy: Implement Montana's Comprehensive Cancer Control Plan.

Anyone interested in joining the Montana Comprehensive Cancer Control Coalition can visit the website at www.mtcancercoalition.org.

Flathead City-County Health Department

We're on the Web:

flatheadhealth.org/healthadmin

THE COALITION FOR A HEALTHY FLATHEAD is a joint effort between the Flathead County Tobacco Use Prevention Program and the Region 1 Comprehensive Cancer Control Program.

Tobacco Prevention has a mission to reduce tobacco use by promoting a tobacco-free lifestyle and focuses on changing the way tobacco is used, sold and promoted in Montana; preventing youth from beginning a lifetime of addiction to tobacco products; and helping to protect non-smokers from the hazardous effects of secondhand smoke. Comprehensive Cancer Control has a mission to reduce cancer incidence, morbidity, and mortality, and cancer related health disparities. The program works to bring many partners together, use data and research results to identify priorities among cancer issues, implement evidence-based solutions, and use limited resources efficiently.

To join, contact Wendy Olson at 751-8106, wolson@flathead.mt.gov or Leslie Deck at 751-8107, ldeck@flathead.mt.gov.